

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF DEEDS RECEIVED	
DISTRICT	
SANTA FE	
FILE	
U.S.U.B.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
PRODUCTION OFFICE	

Operator

TEXACO Inc.

Address

P. O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership			

Other (Please explain)

Change of Transporter from Getty Oil Co. to TEXACO PRODUCING INC. effective 6/1/85.

change of ownership give name

and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name C.P. Falby "B" Federal	Well No. 1	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee FED LC-033705-(5)	Lease No.
Location Unit Letter K, 1980 Feet From The South Line and 1980 Feet From The West	Line of Section 8	Township 22S	Range 37E	County Lea

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1910, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Texaco Producing Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000, Tulsa, OK 74102
Well produces oil or liquids, give location of tanks.	Unit K, Sec. 8, Twp. 22S, Rge. 37E
Is gas actually connected?	Yes
When	9/10/62

this production is commingled with that from any other lease or pool, give commingling order number: PLC-59

NOTE: Complete Parts IV and V on reverse side if necessary.

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

[Signature]
District 1 Supervisor
Date: 7/2/85

OIL CONSERVATION DIVISION

APPROVED JUL 2 2 1985 85
BY *[Signature]*
TITLE DISTRICT 1 SUPERVISOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only sections I, II, III, and IV for changes of operator, well name or number, or transporter or other such change in conditions.

Separate Forms O-104 must be filed for each pool in multi-pool completed wells.